PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000



or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

indicated unless corrected I maintenance fee notification	nclow or directed otherwise	in Block I, by (a) spo	cifying a new		s; and/or (b) indicating a separ		
	E ADDRESS (Note: Use Block I for	any change of oddress)		Note: A certificate of Fee(s) Transmittal. T papers. Each addition	of mailing can only be used fo his certificate cannot be used f nal paper, such as an assignme	r domestic mailings of the or any other accompanying nt or formal drawing, must	
7:	590 07/08/2004	(O1P	E	have its own certifier	ite of mailing or transmission.		
Mark C Jacobs Esq 3033 El Camino Avenue		AUG 0 9	2004	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
		13	, com		Mark C. Jacobs	(Depositor's name)	
		ALB MADE	A SAN		1100	(Signature)	
,		INTE		8	- Y-2004	(Date)	
APPLICATION NO.	FILING DATE	FIRS	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
N9/541,647	04/03/2000	<u> </u>	Phillip Apple	:	1567	4431	
TITLE OF INVENTION: CLOSEABLE THATCHED UMBRELLA 08/11/2004 SHASSEN2 00000145 09541647 665.00 Op							
		100115 575		PUBLICATION FEE	TOTAL FEE(S) DUE	30.06.0PE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	·			10/08/2004	
nonprovisional	YES	\$665		, \$0	\$665	10/06/2004	
EXA	MINER	ART UNIT		CLASS-SUBCLASS			
YIP, W	INNIE S	3637		135-025100			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Castomer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for IT a substitute for filing an assignment.				
PLEASE NOTE: Unles recordation as set forth	s an assignce is identified b in 37 CFR 3.11. Completion	elow, no assignee data of this form is NOT a	substitute for fi	n the patent. If an assiling an assignment.	ignee is identified below, the c	locument has been med for	
(A) NAME OF ASSIGN	NEE	(B) R	B) RESIDENCE: (CITY and STATE OR COUNTRY)				
AMERICAN HOLTZKRAFT, INC. Mt. Pleasant Mills, PA							
Please check the appropria	le assignee category or categ	ories (will not be printe	d on the patent	: O individual	corporation or other private g	roup entity	
4n. The following fee(s) are	e enclosed:		syment of Fee(s	•			
Issue Fee			A check in the amount of the fee(s) is enclosed.				
☐ Publication Fee (No small entity discount permitted) Advance Order - # of Copies10			☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to				
		Do	posit Account	Number	(enclose an extra	copy of this form).	
5. Change in Entity Statu	s (from status indicated above MALL ENTITY status. See	e) 37 CFR 1.27. 📮	b. Applicant is	not claiming SMALL I	ENTITY status. Sec, e.g., 37 CF	R 1.27(g)(2).	
			Fee (if any) or	to re-apply any previo	ously paid issue fee to the applic	ation identified above.	
NOTE: The Iceus Ess and	Publication Fee (if required) cords of the United States Pa	will not be accepted for	om anvone othe	er than the applicant; a	registered attorney or agent; or	the assignee or other party in	
(Authorized Signature)		(Date)	au	9, VO			
Wickminner Authun 5531	J-17JV.				by the public which is to file (as 12 minutes to complete, includy comments on the amount of tind Trademark Office, U.S. De ESS. SEND TO: Commissione is it displays a valid OMB control.		
under the raperwork Redi	חסווסנו אבי זם אם, הטווסנו, הכיציו	is are reduited to resho	···· ··· · · · · · · · · · · · · · · ·	vi mittimitti milta			

TRANSMIT THIS FORM WITH FEE(S)

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TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

695.00 TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Mark C.

Complete if Known				
Application Number	09/541,647			
Filing Date	4/3/2000			
First Named Inventor	Phillip Apple			
Examiner Name	Winnie S. Yip			
Art Unit .	3637			
Attorney Docket No.	1567			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
Check Credit card Money Other None	3. ADDITIONAL FEES				
Deposit Account:	Large Entity Small Entity				
Deposit	Fee Fee Fee Fee Fee Description	Fee Paid			
Account Number	1051 130 2051 65 Surcharge - late filing fee or oath				
Deposit Account	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet				
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification				
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805 1,840° 1805 1,840° Requesting publication of SIR after Examiner action				
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month				
1. BASIC FILING FEE	1252 420 2252 210 Extension for reply within second month				
Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month				
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 2254 740 Extension for reply within fourth month				
1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month				
1002 340 2002 170 Design filling fee	1401 330 2401 165 Notice of Appeal				
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filing a brief in support of an appeal				
1004 770 2004 385 Relssue filing fee	1403 290 2403 145 Request for oral hearing				
1005 160 2005 60 Provisional filing fee	1451 1,510 1451 1,510 Petition to Institute a public use proceeding				
SUBTOTAL (1) (\$)	1452 110 2452 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330 2453 665 Petition to revive - unintentional				
Fee from	1301 1,330 2301 665 Utility (ssue fee (or reissue)	665			
Total Claims Extra Claims below Fee Paid Total Claims X = X	7				
Independent	1 1503 640 2503 320 Plant issue fee				
Claims -3" - 1" - 1" - 1" - 1" - 1" - 1" - 1"	1460 130 1460 130 Petitions to the Commissioner				
Large Entity Small Entity	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)				
Fee Fee Fee Pee Description	1805 180 reide 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	8021 40 802: 40 Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))				
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be				
1204 86 2204 43 ** Reissue independent claims over original patent	examined (37 CFR 1.129(b)) 1801 770 2801 385 Request for Continued Examination (RCF)				
1205 18 2205 9 ** Reissue claims in excess of 20	1801 770 2801 385 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination				
and over original patent	of a design application				
SUBTOTAL (2) (\$)	Other fee (specify) 10 soft copies	30			
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 69	5			

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Registration No.

(Altorney/Agent)

24043

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